

CONGRESSIONAL BUDGET OFFICE COST ESTIMATE

July 3, 2003

S. 1015 Mosquito Abatement for Safety and Health Act

As ordered reported by the Senate Committee on Health, Education, Labor, and Pensions on May 14, 2003 and passed by the Senate on June 16, 2003

S. 1015 would authorize the Centers for Disease Control and Prevention (CDC) to provide grants and technical assistance to states and political subdivisions to prevent and control mosquito-borne disease. States could use grant funds to coordinate mosquito control programs across the state and to provide funding to political subdivisions to assess their mosquito abatement needs. Grant funding also would be available to political subdivisions to develop and operate abatement programs. The act would authorize appropriations of \$100 million in fiscal year 2003 and such sums as may be necessary for fiscal years 2004 through 2007 for those purposes. Additional provisions of the act would direct the National Institutes of Health (NIH) to support research on controlling insect and vermin populations that transmit diseases to humans, and authorize funding of \$30 million in 2003 and such sums as may be necessary to support these activities through 2007.

S. 1015 contains no intergovernmental or private-sector mandates as defined in the Unfunded Mandates Reform Act (UMRA). The act would provide grants to state and local governments, and any costs to apply for or administer the grants would be voluntary.

ESTIMATED COST TO THE FEDERAL GOVERNMENT

The estimated cost to implement S. 1015 is shown in the following table. The costs of this legislation fall within budget function 550 (health).

	By Fiscal Year, in Millions of Dollars					
	2003	2004	2005	2006	2007	2008
CHANGES IN	SPENDING	SUBJECT	TO APPROI	PRIATION		
CDC						
Estimated Authorization Level	100	102	104	107	109	(
Estimated Outlays	0	68	121	112	108	72
NIH						
Estimated Authorization Level	30	31	31	32	33	(
Estimated Outlays	0	28	30	31	31	23
Total						
Estimated Authorization Level	130	133	135	139	142	(
Estimated Outlays	0	96	151	143	139	95

BASIS FOR ESTIMATE

S. 1015 would authorize new funding in 2003 of \$100 million for CDC and \$30 million for NIH. Assuming that the 2003 level is increased annually to reflect anticipated inflation, CBO estimates that implementing the CDC programs would require the total appropriations of \$522 million over the 2003-2008 period. Similarly, CBO estimates that implementing the NIH activities would require \$157 million in appropriations over the 2003-2008 period. Those figures are based on funding provided for similar research initiatives.

Based on historical spending patterns for similar activities at CDC and NIH and assuming enactment by October 1, 2003, CBO estimates that act would have no effect on spending in 2003 and that outlays would total \$96 million in 2004 and \$625 million over the 2003-2008 period, assuming appropriation of the necessary amounts. Enacting S. 1015 would not affect direct spending or receipts.

INTERGOVERNMENTAL AND PRIVATE-SECTOR IMPACT

S. 1015 contains no intergovernmental or private-sector mandates as defined in UMRA. The act would provide grants to state and local governments, and any costs to apply for or administer the grants would be voluntary.

PREVIOUS CBO ESTIMATE

H.R. 342, as ordered reported by the House Committee on Energy and Commerce on January 29, 2003, is nearly identical to S. 1015. The main differences between the bills is that S. 1015 allows the Secretary to award grants to consortia of political subdivisions and to provide for additional grant funds per jurisdiction at his discretion. CBO issued a cost estimate for H.R. 342 on February 11, 2003, and assumed enactment by July 1, 2003. CBO estimated that outlays would total \$23 million in 2003 and \$649 million over the 2003-2008 period, assuming appropriation of the necessary amounts. CBO's estimate of S. 1015 assumes an October 1, 2003 enactment date and assumes program spending would occur more slowly than under H.R. 342 because of S. 1015's dispersion of funds to political subdivisions.

ESTIMATE PREPARED BY:

Federal Cost:

Centers for Disease Control and Prevention: Jeanne De Sa

National Institutes for Health: Chris Topoleski

Impact on State and Local Governments: Leo Lex

Impact on the Private Sector: Daniel Wilmoth

ESTIMATE APPROVED BY:

Paul R. Cullinan Chief for Human Resources Cost Estimate Unit Budget Analysis Division